

**CITY/TOWN OF TEMPE**  
**INDEPENDENT EXPENDITURE NOTIFICATION FORM FOR**  
**CORPORATIONS, LIMITED LIABILITY COMPANIES, AND LABOR ORGANIZATIONS**


<b>CITY OF TEMPE</b> <b>CITY CLERK'S OFFICE</b>		<b>Expenditure Status:</b>	
Election Cycle: <b>2014</b>	Committee ID: <b>IE14-01</b>	Verified: <b>7/30/2014</b>	
<input checked="" type="checkbox"/> Initial Expenditure	Total Amount of Expenditures this Notification:	Unverified: _____	
<input type="checkbox"/> Additional Expenditure	<b>\$4,678.78</b>	Delinquent: _____	

Full Name of Organization <b>Save Our Future Now</b>			
Address <b>4715 N. 32nd Street, Suite 107</b>	City <b>Phoenix</b>	State <b>AZ</b>	Zip Code <b>85018</b>
Phone Number <b>(602) 377-2553</b>	E-mail Address <b>tbphoenix2@aol.com</b>		

Expenditure Date:	<b>7/29/2014</b>	Expenditure Amount:	<b>\$4,678.78</b>
Vendor/Payee Name:	<b>Coleman Dahm &amp; Associates</b>		
Candidate Name:	<b>David Schapira &amp; Lauren Kuby</b>	<input checked="" type="checkbox"/> Supports <input type="checkbox"/> Opposes	
Communication Type:	<input checked="" type="checkbox"/> Communications <input type="checkbox"/> Travel <input type="checkbox"/> Professional Services <input type="checkbox"/> Event Expenses <input type="checkbox"/> Overhead <input type="checkbox"/> Administration <input type="checkbox"/> Miscellaneous		
Description of Purchase:	Please use a description from the list of subcategories provided. <b>Mailings, Postage, Production cost</b>		

Expenditure Date:		Expenditure Amount:	
Vendor/Payee Name:			
Candidate Name:		<input type="checkbox"/> Supports <input type="checkbox"/> Opposes	
Communication Type:	<input type="checkbox"/> Communications <input type="checkbox"/> Travel <input type="checkbox"/> Professional Services <input type="checkbox"/> Event Expenses <input type="checkbox"/> Overhead <input type="checkbox"/> Administration <input type="checkbox"/> Miscellaneous		
Description of Purchase:	Please use a description from the list of subcategories provided.		

☐ See other side or attached form for additional expenditures for this notification.

  
Signature

**7/29/14**  
Date